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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

*Fee Only*

In re application of: Francis T. McQuade Docket: 102276-200  
 Charles L. Barto  
 Serial No.: 10/027,146 Art Unit: 2829  
 Filed: December 20, 2001 Examiner: J. Hollington  
 Assignee: Wentworth Laboratories, Inc. Conf. No. 3054  
 Title: METHOD FOR CHEMICALLY ETCHING PHOTO-DEFINED MICRO  
 ELECTRICAL CONTACTS

## Certificate of Facsimile

Date of Transmission: February 17, 2004  
 I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being filed with the United States Patent and Trademark Office via facsimile transmission to 703-872-9306 on the date shown above.

Signed:

Name: William A. Simons

AMENDMENT AND REPLY TO OFFICE ACTION  
UNDER 37 C.F.R. 1.121

Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Dear Sir:

In the matter of the above-identified application for Letters Patent and in response to the Office Action dated September 16, 2003, (Paper No. 7) for which a response was due on or before December 16, 2003, and for which a petition for a two month extension of time is attached hereto, please enter and consider the following Amendment and Remarks:

**Amendments to the Claims begin on page 2 of this paper.**

**Amendments to the Drawings begin on page 5 of this paper and include 7 attached replacement sheets.**

**Remarks begin on page 6 of this paper.**

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10/027/46

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

|                                  |              |                          |
|----------------------------------|--------------|--------------------------|
| TOTAL CLAIMS                     |              |                          |
| FOR                              | NUMBER FILED | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | minus 20 =   | *                        |
| INDEPENDENT CLAIMS               | minus 3 =    | *                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |              | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |   |
|------------------------------------------------|-------------------------------------------|---------------------------------------------|------------------|---|
|                                                |                                           |                                             | Minus            | = |
| Total                                          | * 13                                      | Minus                                       | ** 20            | = |
| Independent                                    | * 2                                       | Minus                                       | *** 3            | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                           |                                             |                  |   |

SMALL ENTITY  
TYPE

| RATE      | FEES  | RATE      | FEES  |
|-----------|-------|-----------|-------|
| BASIC FEE | \$385 | BASIC FEE | \$470 |
| X\$9=     |       | X\$18=    |       |
| X\$13=    |       | X\$86=    |       |
| +145=     |       | +290=     |       |
| TOTAL     |       | TOTAL     |       |

OTHER THAN  
SMALL ENTITY  
OR

| SMALL ENTITY     | OTHER THAN<br>SMALL ENTITY |
|------------------|----------------------------|
| RATE             | ADDITIONAL<br>FEE          |
| X\$9=            | X\$18=                     |
| X\$13=           | X\$86=                     |
| +145=            | +290=                      |
| TOTAL ADDIT. FEE | TOTAL ADDIT. FEE           |

(Column 1) (Column 2) (Column 3)

| AMENDMENT B                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |   |
|------------------------------------------------|-------------------------------------------|---------------------------------------------|------------------|---|
|                                                |                                           |                                             | Minus            | = |
| Total                                          | *                                         | Minus                                       | **               | = |
| Independent                                    | *                                         | Minus                                       | ***              | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                           |                                             |                  |   |

SMALL ENTITY  
RATE ADDITIONAL  
FEE

| RATE             | ADDITIONAL<br>FEE | RATE             | ADDITIONAL<br>FEE |
|------------------|-------------------|------------------|-------------------|
| X\$9=            |                   | X\$18=           |                   |
| X\$13=           |                   | X\$86=           |                   |
| +145=            |                   | +290=            |                   |
| TOTAL ADDIT. FEE |                   | TOTAL ADDIT. FEE |                   |

(Column 1) (Column 2) (Column 3)

| AMENDMENT C                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |   |
|------------------------------------------------|-------------------------------------------|---------------------------------------------|------------------|---|
|                                                |                                           |                                             | Minus            | = |
| Total                                          | *                                         | Minus                                       | **               | = |
| Independent                                    | *                                         | Minus                                       | ***              | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                           |                                             |                  |   |

SMALL ENTITY  
RATE ADDITIONAL  
FEE

| RATE             | ADDITIONAL<br>FEE | RATE             | ADDITIONAL<br>FEE |
|------------------|-------------------|------------------|-------------------|
| X\$9=            |                   | X\$18=           |                   |
| X\$13=           |                   | X\$86=           |                   |
| +145=            |                   | +290=            |                   |
| TOTAL ADDIT. FEE |                   | TOTAL ADDIT. FEE |                   |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.